

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-62-3-117

API NUMBER 15-009-04811-00-00

LEASE NAME McKinney

RECEIVED

NOV 06 2003
KCC WICHITA

TYPE OR PRINT
NOTICE: Fill out completely 2970
and return to Cons. Div.
office within 30 days-660

WELL NUMBER 2
990' Ft. from S Section Line Per CP 2/3
2,310' Ft. from E Section Line Per CP 2/3

LEASE OPERATOR L.D. DRILLING, INC.

SEC. 20 TWP. 19 RGE. 13 (E) or (W)

ADDRESS 7 SW 26 Ave, Great Bend, KS 67530

COUNTY Barton

PHONE/(316) 793-3051 OPERATORS LICENSE NO. 6039

Date Well Completed 10-1955

Character of Well Oil

Plugging Commenced 10-31-03

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Plugging Completed 10-31-03

The plugging proposal was approved on 10-31-03 (date)

by Case Morris (KCC District Agent's Name).

Is ACO-1 filed? N/A if not, is well log attached? N/A

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3447

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
Surface		0	<u>763</u>	8 5/8"	<u>763</u>	0
Casing Rod		0	<u>3445</u>	5 1/2"	<u>3445</u>	0 <u>Per CP 2/3</u>
			<u>2462</u>		<u>2462</u>	0 <u>Per CP 2/3</u>

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from feet to feet each set:
Ran 2200' of 2 1/2" Tubing, Mixed 160 sx 60/40 10% Gel w/ 500# Hulls & Circulated Cement to Surface. Pulled Tubing. Hooked to 5 1/2" Casing. Mixed 140 sx 60/40 10% Gel & Cement did not Circulate. Ordered more Cement Mixed 95 sx 60/40 10% Gel & Circulated Cement to Surface. Max Aver "250" # Shut in 50#

Allied Cementing

Name of Plugging Contractor L.D. Drilling, Inc. License No. 6039

Address 7 Sw 26 Ave, Great Bend, 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: L.D. Drilling, Inc.

STATE OF Kansas COUNTY OF Barton, ss.

Susan Schneweis

(Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained and the log of the above-described well as filed the the same are true and correct, so help me God.

(Signature) Susan Schneweis

(Address) 7 SW 26 Ave, Great Bend, KS 67530

SUBSCRIBED AND SWORN TO before me this 5 day of November 2003

Bessie DeWerff
Notary Public

My Commission Expires: 05-20-05 Bessie DeWerff

NOTARY PUBLIC - State of Kansas
BESSIE M. DeWERFF
My Appt. Exp. 5-20-05

Form CP-4
Revised 03-88